

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			10-19-91
O.I.P.E. CLASSIFIER	MGR	JD	10-29-91
FORMALITY REVIEW	MGR	1145	11
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	9/02
2	+
3	+
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
13	✓
14	✓
15	✓
16	✓
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37	✓
38	✓
39	✓
40	✓
41	✓
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	+
49	+
50	+

Claim	Date
Final Original	
51	9/02
52	+
53	+
54	+
55	+
56	+
57	+
58	+
59	+
60	+
61	+
62	+
63	+
64	+
65	+
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89	+
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93	+
94	+
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96	+
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100	+

Claim	Date
Final Original	
101	
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If more than 150 claims or 10 actions  
staple additional sheet here.

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